

039 Bellin Hospital
744 S Webster Ave, PO Box 23400
Green Bay, WI 54305
920-433-3500

Hospital Type: GMS
 County: Brown
 Analysis Area: 4-Northeastern
 Inpatient Volume Group: 6

Overall Hospital Utilization

Total Discharges:	9,501	Average Length of Stay (days):	3.7
Total Patient Days:	35,519	Average Charge per Discharge:	\$22,241

Obstetrical Utilization

Normal Childbirths:	839	Percent of All Childbirths:	70.1%
Cesarean Childbirths:	318	Percent of All Childbirths:	26.6%
Other Childbirths:	40	Percent of All Childbirths:	3.3%
Total Childbirths:	1,197		
Total Newborns:	1,209		

Psychiatric Utilization

Discharges:	15	Percent of All Discharges:	0.2%
Patient Days:	53	Percent of All Patient Days:	0.1%

AODA Utilization

Discharges:	21	Percent of All Discharges:	0.2%
Patient Days:	123	Percent of All Patient Days:	0.3%

Patient Discharge Status

<u>Discharge Status</u>	<u>% Discharges</u>
Home or Self-Care	75.3%
Other GMS Hospital	1.7%
Critical Access Hospital (CAH)	0.0%
Skilled Nursing Facility	9.9%
Intermediate Care Facility	0.0%
Inpatient Rehabilitation Facility	2.3%
Hospice	0.8%
Other Institution	0.0%
Home Health Service	7.0%
Left Against Medical Advice	0.2%
Expired	1.6%
Discharge/Tran to Court/Law Enforcmnt	0.0%
Other	1.2%

Expected Pay Source Distribution

<u>Primary Payer</u>	<u>% Discharges</u>
Medicare	41.1%
Medicaid/BadgerCare	16.1%
Other Government	1.5%
Commercial or Private Insurance	38.8%
Self-Pay	2.5%
Other or Unknown Insurance	0.0%

Age Distribution

<u>Age Group</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Newborn	12.7%	7.2%
Under 15	3.7%	2.0%
15 - 19	1.7%	1.3%
20 - 24	3.5%	2.6%
25 - 34	9.8%	7.5%
35 - 44	5.6%	5.1%
45 - 54	9.9%	10.6%
55 - 64	15.6%	16.8%
65 - 74	17.8%	21.7%
75 - 84	13.7%	17.9%
85 & Over	6.1%	7.2%

Sex Distribution

<u>Sex</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Male	44.4%	46.7%
Female	55.6%	53.3%

Race Distribution

<u>Race</u>	<u>% Discharges</u>	<u>% Patient Days</u>
Amer.Ind/Alaskan Native	1.9%	2.1%
Asian	1.0%	0.7%
Black/African Amer.	1.7%	1.4%
Native Hawaii/Pac.Isl.	0.0%	0.0%
White	89.4%	91.6%
Multiracial	5.0%	3.5%
Declined	1.0%	0.8%
Unavailable	0 %	0 %

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APR-DRG Specific Data - Average Length of Stay (ALOS)

APR-DRG # and Description	This Facility		Group Averages					
	Discharges	ALOS	Analysis Area		Inpatient Volume Group		All GMS Hospitals	
			ALOS	Ratio	ALOS	Ratio	ALOS	Ratio
139 Pneumonia	144	3.5	3.7	0.95	4.2	0.83	4.0	0.88
140 Chronic Obstructive Pulmonary Disease	59	3.2	3.8	0.84	3.8	0.84	3.7	0.86
175 Angioplasty without Heart Attack	74	2.5	2.2	1.14	2.6	0.96	2.6	0.96
194 Heart Failure	180	3.3	3.7	0.89	4.5	0.73	4.2	0.79
201 Heart Abnormal Rhythm and Conduction Disorders	105	2.4	2.6	0.92	2.9	0.83	2.7	0.89
221 Major Bowel Procedures	142	9.0	8.8	1.02	9.1	0.99	8.7	1.03
301 Hip Replacement	379	3.0	3.2	0.94	3.7	0.81	3.6	0.83
302 Knee Replacement	795	2.8	2.9	0.97	3.2	0.88	3.2	0.88
383 Cellulitis and Other Bacterial Skin Infections	93	3.5	3.5	1.00	3.9	0.90	3.8	0.92
463 Kidney/Urinary Tract Infection	58	2.4	3.0	0.80	3.6	0.67	3.5	0.69
540 Cesarean Delivery	318	3.9	3.7	1.05	4.0	0.98	3.7	1.05
560 Vaginal Delivery	839	2.3	2.1	1.10	2.3	1.00	2.2	1.05
640 Normal Newborn, Birthweight 2500g+	1085	2.1	2.1	1.00	2.2	0.95	2.2	0.95
720 Blood Infection/Septicemia	140	5.3	4.9	1.08	6.9	0.77	6.1	0.87
860 Rehabilitation	255	12.5	13.5	0.93	13.4	0.93	13.0	0.96

APR-DRG Specific Data - Average Charge per Discharge (Actual & Risk-Adjusted^)

APR-DRG # and Description	This Facility		Risk Adjusted Group Averages					
	Average Charge	Risk Adjusted Average Charge	Analysis Area		Inpatient Volume Group		All GMS Hospitals	
		Charge	Charge	Average Charge	Ratio	Average Charge	Ratio	Average Charge
139 Pneumonia	\$12,265	\$12,526	\$14,513	0.86	\$18,421	0.68	\$16,459	0.76
140 Chronic Obstructive Pulmonary Disease	\$14,124	\$13,537	\$14,670	0.92	\$16,728	0.81	\$15,391	0.88
175 Angioplasty without Heart Attack	\$35,958	\$32,845	\$41,872	0.78	\$52,381	0.63	\$51,405	0.64
194 Heart Failure	\$11,157	\$11,265	\$14,783	0.76	\$19,944	0.56	\$18,133	0.62
201 Heart Abnormal Rhythm and Conduction Disorders	\$9,369	\$9,644	\$13,465	0.72	\$14,765	0.65	\$13,539	0.71
221 Major Bowel Procedures	\$49,213	\$52,514	\$49,891	1.05	\$56,641	0.93	\$54,051	0.97
301 Hip Replacement	\$32,810	\$33,512	\$38,760	0.86	\$40,217	0.83	\$39,750	0.84
302 Knee Replacement	\$32,759	\$33,661	\$38,980	0.86	\$37,884	0.89	\$38,155	0.88
383 Cellulitis and Other Bacterial Skin Infections	\$11,413	\$11,846	\$12,068	0.98	\$15,374	0.77	\$14,039	0.84
463 Kidney/Urinary Tract Infection	\$7,526	\$7,858	\$11,153	0.70	\$14,737	0.53	\$13,237	0.59
540 Cesarean Delivery	\$11,234	\$11,107	\$14,297	0.78	\$15,661	0.71	\$15,475	0.72
560 Vaginal Delivery	\$4,382	\$4,308	\$5,531	0.78	\$7,860	0.55	\$7,589	0.57
640 Normal Newborn, Birthweight 2500g+	\$2,012	\$1,916	\$2,850	0.67	\$3,052	0.63	\$2,835	0.68
720 Blood Infection/Septicemia	\$24,721	\$26,629	\$25,156	1.06	\$39,813	0.67	\$34,539	0.77
860 Rehabilitation	\$29,382	\$29,633	\$33,006	0.90	\$40,577	0.73	\$39,087	0.76

N/A - Zero Discharges reported for APR-DRG
 * - 1 through 4 Discharges reported for APR-DRG

^ Risk-Adjusted Charges calculated using 3M™ APR DRG Software Version 27.0 licensed through 3M Health Information Systems.
 # Risk-Adjusted Charges not calculated for APR-DRGs related to Mental Diseases/Disorders and/or Alcohol/Drug Use/Abuse/Dependence.